



Commonwealth of Massachusetts
Division of Professional Licensure
Board of State Examiners of Plumbers and Gas Fitters
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239 Causeway Street □ Boston, MA 02114 5th Floor
www.mass.gov/reg/boards/pl/forms.htm
(617) 727-9952

APPLICATION FOR EXTENSION OF PRODUCT APPROVAL

Fee: \$150 per application
(Payable to the Comm. of MA)
Limited to 10 items per application
Maximum \$1000.00

Type: Plumbing _____ Gas _____

All correspondence and notifications to be mailed to:
(Please check one only)

MANUFACTURER _____ **OR** MANUFACTURER'S REPRESENTATIVE _____

MANUFACTURER:

MANUFACTURER'S REPRESENTATIVE:

Name: _____ Name: _____

Address: _____ Address: _____

City/State/Zip: _____ City/State/Zip: _____

Telephone: _____ Telephone: _____

Contact Person: _____ Contact Person: _____

E-Mail Address: _____ E-Mail Address: _____

Title: _____ Title: _____

Original Approval No. _____

PRODUCT INFORMATION

Model No.(s) previously approved by the Board limited to 10 items per application up to ten applications.
For your information: Any gas product that required a disclaimer on the one provisional approval will need to submit a copy of installation manual.

Model No. (s) _____

Brief Description: _____

Originally approved by the Board: _____
Month / Day / Year

Date of latest extension of approval: _____
Month / Day / Year